



10/20/08

OCT 22 2008

2555 Davie Road • Ft. Lauderdale, FL 33317 • Phone 954.927.2044 • Fax 954.927.0446 • www.makosurgical.com

## EXHIBIT E

### 510(K) SUMMARY

**Submitter:** MAKO Surgical Corp.  
**Address:** 2555 Davie Road, Fort Lauderdale, FL 33317  
**Phone number / Fax Number:** (Ph) 954-927-2044 x 605; (F) 954-927-0446  
**Contact Person:** William F. Tapia  
**Date Prepared:** July 22, 2008  
**Proprietary Name:** MAKO Surgical Corp. Patellofemoral Knee Implant System  
**Common Name:** Patellofemoral replacement, patellofemoral knee system  
**Classification Name / #:** Class II; 21 CFR 888.3540  
**Product Code:** 87 KRR – Knee joint patellofemoral polymer/metal semi-constrained cemented prosthesis

**Substantial Equivalence:** The MAKO Surgical Corp. Patellofemoral Knee Implant System II (MPFII) is substantially equivalent to MAKO Surgical Corp. Patellofemoral Knee Implant System (K080029), Stryker Corporation's Avon™ Patellofemoral Joint Prosthesis (510k # K010100); Avon™ Patellar Component (510k # K020841); Avon™ Extra Small Patellofemoral Replacement (510k # K041160); and Avon™ PFJ Prosthesis [additional patella components] (510k # K051948).

Feature	MAKO Surgical Corp. Patellofemoral Knee Implant System II
Intended Use/Indications for Use	The MAKO Surgical Corp. Patellofemoral Knee Implant System II is intended to be used in cemented patello-femoral arthroplasty in patients with degenerative arthritis in the distal femur and patella, patients with a history of patellar dislocation or patella fracture, or patients with failed previous surgery (arthroscopy, tibial tubercle elevation, lateral release) where pain, deformity or dysfunction persists.
Implant Components	<ul style="list-style-type: none"> <li>Patellofemoral component – CoCr</li> <li>Patella component – UHMWPE</li> <li>Radiographic o-ring in patella component</li> </ul>
Sizes	<ul style="list-style-type: none"> <li>Patellofemoral components available in 8 sizes.</li> <li>The patella components are available in 6 sizes</li> </ul>
Materials	<ul style="list-style-type: none"> <li>Patellofemoral component – CoCr</li> <li>Patella component – UHMWPE</li> <li>Radiographic o-ring marker – titanium wire</li> </ul>
Instrumentation	Provided separately in a re-usable/sterilizable tray. Tray includes various tools (e.g., sizers, templates, trials, drill, gage, impactors, inserters, extractors) used during surgery. MPFII can also be used with MAKO Tactile Guidance System (TGS).
Sterilization and Packaging	Sterilization: <ul style="list-style-type: none"> <li>Patellofemoral and patella components – gamma radiation</li> <li>Instrumentation – steam sterilization</li> </ul> Packaging: <ul style="list-style-type: none"> <li>Both patellofemoral and patella components are supplied in double sealed containers maintaining double sterile barriers.</li> </ul>
Biocompatibility	Both devices are made of materials for surgical implant applications per recognized ASTM standards.

**Description:** This device consists of a CoCrMo patellofemoral component and an ultra-high molecular weight polyethylene patella component. These components are intended for cemented, one-time use only. The anterior surface of the patellofemoral component is polished and features a trochlear groove. The posterior surface of the patellofemoral and patella component employ features such as cement pockets and pegs for enhanced stability of the prosthesis when cemented onto the femur and patella, respectively.



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These components are single use only and are intended for implantation with bone cement.



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration  
9200 Corporate Boulevard  
Rockville MD 20850

MAKO Surgical Corporation  
% Mr. William F. Tapia  
Vice President, Regulatory  
2555 Davie Road  
Fort Lauderdale, Florida 33317

OCT 22 2008

Re: K082088

Trade/Device Name: MAKO Surgical Corp. Patellofemoral Knee Implant System II  
Regulation Number: 21 CFR 888.3540  
Regulation Name: Knee joint patellofemoral polymer/metal semi-constrained cemented  
prosthesis  
Regulatory Class: II  
Product Codes: KRR  
Dated: July 22, 2008  
Received: July 24, 2008

Dear Mr. Tapia:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

Page 2 - Mr. William F. Tapia

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Center for Devices and Radiological Health's (CDRH's) Office of Compliance at (240) 276-0120. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding postmarket surveillance, please contact CDRH's Office of Surveillance and Biometric's (OSB's) Division of Postmarket Surveillance at 240-276-3474. For questions regarding the reporting of device adverse events (Medical Device Reporting (MDR)), please contact the Division of Surveillance Systems at 240-276-3464. You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (240) 276-3150 or at its Internet address <http://www.fda.gov/cdrh/industry/support/index.html>.

Sincerely yours,

A handwritten signature in black ink, appearing to read "Mark N. Melkerson", with a stylized flourish at the end.

Mark N. Melkerson  
Director  
Division of General, Restorative  
and Neurological Devices  
Office of Device Evaluation  
Center for Devices and  
Radiological Health

Enclosure



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## EXHIBIT G

### INDICATIONS FOR USE

510(k) Number (if known): K082088

Device Name: MAKO Surgical Corp. Patellofemoral Knee Implant System II

Indications for Use:

The MAKO Surgical Corp. Patellofemoral Knee Implant System is intended to be used in cemented patellofemoral arthroplasty in patients with degenerative arthritis in the distal femur and patella, patients with a history of patellar dislocation or patella fracture, or patients with failed previous surgery (arthroscopy, tibial tubercle elevation, lateral release) where pain, deformity or dysfunction persists.

These components are single use only and are intended for implantation with bone cement.

Prescription Use   X    
(Part 21 CFR 801 Subpart D)

AND/OR

Over-the-Counter Use         
(21 CFR 801 Subpart C)

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(PLEASE DO NOT WRITE BELOW THIS LINE - CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrent with CDH, Office of Device Evaluation (ODE)  
(Division Sign-Off)

**Division of General, Restorative,  
and Neurological Devices**

510(k) Number K082088